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CONFIRMATION NO. 7186

Bib Data Sheet

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|-----------------------------|-----------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER 10/016,457 | FILING DATE 11/01/2001 RULE | CLASS 606 | GROUP ART UNIT 3731 | ATTORNEY DOCKET NO. HAN-006 |
|-----------------------------|-----------------------------------|--------------|------------------------|-----------------------------------|

APPLICANTS

Jorge L. Orbay, Miami, FL;

** CONTINUING DATA ***** *None P.R.*** FOREIGN APPLICATIONS ***** *None P.R.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED. ** SMALL ENTITY **

** 01/18/2002

| | | | | | |
|---------------------------------|--|------------------|----------------|--------------|--------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY | SHEETS DRAWING | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | FL | 4 | 22 | 4 |
| Verified and Acknowledged | Examiner's Signature <i>P.R.</i> Initials | | | | |

ADDRESS

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TITLE

Locking device for intramedullary pin fixation

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|----------------------------|---|---|
| FILING FEE RECEIVED 430 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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